

## Billing and Policy Therapies Bulletin 329

March 2003

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*Articles with related Part 1 Manual Replacement Pages may be found in the "Program and Eligibility" bulletin. Articles with related Part 2 Manual Replacement Pages may be found in the "Billing and Policy" bulletin. The Medi-Cal Update may not always contain a "Billing and Policy" section.*

### Misuse of Benefits Identification Card: New BICs Issued

Effective March 2003, the Department of Health Services (DHS) Medical Review Branch is increasing the number of replacement Medi-Cal Benefits Identification Cards (BICs) in an ongoing effort to nullify BICs that may have been stolen or misused. Approximately 10,000 recipients per month will be issued BICs with new ID numbers and issue dates. This process may be further escalated as other misuses of BICs are discovered.

When providers attempt to verify eligibility for the recipients who receive new cards by using the Social Security Number (SSN) or previous BIC number, the Automated Eligibility Verification System (AEVS) will return the eligibility message, "For claims payment, current BIC ID number and date of issue required." Providers must have and use the BIC ID number and issue date from the new card when verifying recipient eligibility. All but excluded providers must have and use the BIC ID number and issue date from the new card when submitting claims for reimbursement. The SSN will not be acceptable in the recipient number field on claims. If the BIC ID number and issue date of the new card are not on the claim for recipients whose card returns the message, "For claims payment, current BIC ID number and date of issue required," the claim will be denied.

**Note:** The following excluded provider types (Alternative Birthing Centers, Community Hospital Inpatient, Community Hospital Outpatient, County Hospital Inpatient, County Hospital Outpatient, Genetic Disease Testing, Long Term Care Facility and Mental Health Inpatient) may bill with either the recipient's SSN or the BIC ID number. For all other provider types, the ID number and issue date of the card must be placed on all claims as follows:

- ?? **Paper Claims:** Enter the BIC ID number in the *Insured's ID Number* field (Box 1A). Enter the issue date in the *Reserved For Local Use* field (Box 19) of the claim. Identify the issue date as "mmddyy."
- ?? **CALPOS Pharmacy Claims:** Enter the BIC ID number in the *Recipient ID* field. The issue date must be placed in the *Issue Date* field per the current *Medi-Cal Point of Service Network Interface Specifications* for CALPOS pharmacy claims.
- ?? **Computer Media Claims (CMC):** Enter the BIC ID number in the *Recipient ID* field. The BIC issue date must be placed in the *Remarks* area. Identify the issue date as "mmddyy."

*Please see **Benefits**, page 2*

**Benefits** (*continued*)

When referring recipients to other providers, such as laboratories, please indicate the BIC ID number and date of issue on the referral. If a provider, such as a laboratory, receives a referral without a recipient's BIC ID number and issue date, the laboratory must contact the referring provider for this information. For assistance with obtaining eligibility information, please call the AEVS Help Desk at 1-800-456-2387. For assistance with the POS device or the Medi-Cal Web site, call the POS/Internet Help Desk at 1-800-427-1295. If illegal use of a BIC is suspected, or if you have any questions about this policy, call the Provider Support Center (PSC) at 1-800-541-5555.

**Respiratory Care Services Equipment:  
New Contract Process**

During the late summer of 2003, the Department of Health Services (DHS) will begin a new contracting process with manufacturers of most respiratory care services equipment. This contracting process is the result of Assembly Bill 442 (Chapter 1161, Statutes of 2002), which amended Section 14105.3 of the *Welfare and Institutions Code* and states in part:

“The department may enter into exclusive or nonexclusive contracts on a bid or negotiated basis with manufacturers, distributors, dispensers, or suppliers of appliances, durable medical equipment, medical supplies, and other product-type health care services and with laboratories for clinical laboratory services for the purpose of obtaining the most favorable prices to the state and to assure adequate quality of the product or service.”

More information about the contracting process will be released in a future *Medi-Cal Update* and on the Medi-Cal Web site at [www.medi-cal.ca.gov](http://www.medi-cal.ca.gov).

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## Instructions for Manual Replacement Pages

### Therapies (THP) Bulletin 329

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#### *Part 2*

Remove and replace:

- hcfa tips 1/2 \*
- hcpcs 1/2 \*
- hcpcs iii 1/2 \*
- modif app 5/6 \*

\* Pages updated/corrected due to ongoing provider manual revisions.